THE RECOVERY KERNEL

TSARIN YAKAN AMFANI DA 3-MMC:

3-Methylmethcathinone (Metaphedrone) - Kara yawan amfani, amfani da magunguna don jin dadin jima'i, da amfani da wasu magunguna.

Wannan jagorar ta kasance ne domin yanke magani ba lokacin da ake shan shi sosai ba, amma lokacin da ake ƙoƙarin daina shan shi, saboda yawancin haɗari ya fi bayyana a wajen ƙoƙarin daina shan maganin.

⚠ KIRAYEN DA ZAI KAWO KAWANCE - BA TAHAYA TA LALACI BA | Matsala: kira 112 ko aika sakon rubutu zuwa 08062106493.

Tabbas, ga bayanin da aka yi a Hausa:

Yawan damuwa game da sakamakon rabuwar jiki na 3-MMC ba shi ne matsalar mafi yawa. Matsala ce ta amfani da kwayan, saboda yanayin saurin tasiri wanda ke jawo mutum ya ci gaba da shan akalla duk minti 30 zuwa 60, wasu lokuta tsawon sa'oho da dama, wanda hakan na iya haifar da matsalar lafiyar jiki. Wannan jagorar an shirya ta ne bisa wannan fahimta: don taimakawa mutum ya sha wahala a ƙarshen amfanin kwayan cikin aminci, kuma don fahimtar abin da ke faruwa bayan haka. Haka kuma, saboda amfani da 3-MMC sau da yawa yana hada da wasu nau'o'in kwayoyi, wannan jagorar tana taimakawa a fahimta yadda suke shafar jikin mutum.

Sashe na 0 - Tsaro Na Gaggawa: Karanta Wannan Da Fari.

🚨 GURAN SOSAI.

IDAN KA NA CIKIN MAGANI KO KUMA KA YAKESHI BAYAN CIKI MAKARANTAR, DUBAN WAƊANNAN: TSORON KWALLA, KULLUM DA BA TA DA TSAFI, ZAFEN JIKI WANDA YA FIYE DA YAYE, CIWON GABA, TASHI DA KISHIR, KO ASARA WASU. Wannan alamar *SYMPATHOMIMETIC TOXICITY* ce — wani matsalar da ta shafi tsarin jini da kuma gaba. Kira 112. Adadin damar samun wannan matsala yana ƙara ne kowane lokacin da aka ci maganin, ba kawai a ƙarshen.

🚨 GURAN SOSAI.

Idan ana amfani da opioids tare da 3-MMC (kamar a cikin yanayin "chemsex" inda ake amfani da opioids don kawar da sakamakon), kula da: numfashi mai tsauri ko kuma yayi ƙare, launin ruwan kasa koƙe, da rashin motsi. Wannan alama ce ta cizon opioid. Idan akwai Naloxone, yi amfani da shi sannan kiran 112 nan take. Yawancin mutuwar da aka samu dangane da 3-MMC sun hada da wasu abubuwa, galbaya opioids da sauran abubuwan narkewar hankali.

⚠ Karya.

Wannan jagorar ba za ta bada jadawali don rage amfani da 3-MMC, ko umurnin yadda ake sake shan shi, ko kuma wata shawara game da yadda ake amfani da shi. Saboda haɗarin wannan abu yana ƙaruwa kuma ya danganta ne ga lokaci ba adadin da aka sha, babu hanya mai kyau don bayar da jadawalin 'mai lafiya' don sake shan shi — kowane adadi da za a bayar zai nuna wani hadari mara tabbas. Abin da wannan jagorar ke bayarwa shine tsarin yadda ake ceto mutane daga amfani da abubuwan narkewa, kuma ta hanyar samar da tallafin likita da na wasu mutane don tabbatar da cewan za a daina amfaninsa.

Sashe 1 - Dalilin da ya sa wannan tsarin dakatarwa yake mayar da hankali ne akan yawan amfani, ba kawai kan narkewar abu ɗaya.

THE CENTURION - Tsarin da Ya Sa Karshen Zama Mai Kalubale.

3-MMC na da tsawon lokacin kasancewarsa a cikin jini kasa sa'a ɗaya, kuma abubuwa masu tasiri na iya fara guje wa ne cikin minti uku zuwa sittin bayan shan kwayan. Wannan sauri shi ne dalilin gaske wanda ya sa wannan abu ya zama sanannen abu bayan haramtawa mephedrone, kuma shi ma shine dalilin da ya sa jagorar dakatarwarsa ta buƙe wata hanya fiye da yawancin wasu abubuwan a cikin wannan jerin. Yawanci ba akwai lokaci ɗaya na "shan kwaya ɗaya, sannan jira" kamar yadda yake a cikin abubuwa masu ƙarfi waɗanda ke tsawon lokacin tasiri. Madadin haka, akwai wani yanayi da ya ci gaba da sake farawa, ana shan kwaya bayan kwaya, har sai wani abu - gajiya, kawar da kayan aiki, yanke shawara, ko a mafi munanan halaye Wani abubuwan lafiya - ya kammala shi.

Domin haka, mafi mahimmancin hanyar dakatar da amfani da 3-MMC ba ta da kyau a cikin maganin rashin lafiya ba. Shi ne tsara shiri mai ƙididdiga, kafin lokaci, game da yadda za a kammala wata wasa – waɗanda za su sanarwa, abubuwan da za a ɓace, kuma abin da zai faru a cikin sa'o'i ɗaya lokacin da wahalci ya fi ƙarfi. Sashe na 6 da "tsarin dakile wahalci" a cikin littafin jagorancin [Recovery Guide] sun yi magani akan wannan batu ne kai tsaye.

Sashe na 2 - Tsarin Zaman Jinin Ceto.

Fasfa.	Taliyar gaba.	Abin da ke faruwa.
Rashin lafiya mai tsanani.	Sa'o'i bayan karshen shan miya.	Tausayin da yake bayyana kai tsaye, rashin farin ciki, kuma sau da yawa, ƙarfin tunanin sake shan kwayan – wannan shi ne mafi girman damar ci gaba da amfani da kwayan, maimakon dakatarwa.
Ceton da rana.	Ranar 1–5	Rashin haushin kai, damuwa, rashin kwanciyar barci, sauye-sauyen yunwa; alamun cutar zuciya (tsananin buga zuciya, ƙara yawan bugawa zuciya) na iya ci gaba tsawon kwanaki ɗaya ko biyu bayan cin abinci da yawa, kuma yakamata a nemo taimakon likita idan ba su wuce ba.
Tsarin da za zuwa.	Watan 1-4.	Barci da yunwa suna cigaba da al'ajabi.
PAWS	Watan 1-6.	Matsalolin damuwa da sha'awar abinci, wanda sau da yawa ake samu saboda al'amuran da ke haifar da cin abinci sosai ko mutanen/majasasshen wurare da suka haɗa da irin wannan.

Sashe na 3 - Yaya Tsayin Lokacin Da Zata Ci Gaba Domin Abubuwa Su Komo Da Al'ada?

Lokacin da ake amfani da shi kasancewa, alalace alamu masu tsanaki suna kawar da su cikin kwanaki kaɗan. Amma, ga waɗanda ke ci gaba da amfani da shi a yawan adadi, wajen samun sauƙi galibi yana ɗaukar makonni 2 zuwa 6 kafin yanayin mutum da barci su zama daidaito, kuma akwai damar sake faruwa na alamu masu tsanaki (PAWS) har zuwa watanni. Idan amfani da ƙwayoyi ko wasu abubuwa ne ke haɗa wannan (Sashe 6), lokacin da za a samu sauƙi ya dogara akan yadda ake maganin waɗannan abubuwan — idan ana maganin 3-MMC ɗaya ba tare da la'akari da sauran abubuwan da ke cikin yanayin mutum, hakan na iya rage tsawon lokacin da za a samu cikakken sauƙi.

An ji maganinka.

Idan ka tsaya kuma kwanakin farko sun fi wahala fiye da yadda ka yi tsammani, wannan ya yi daidai da abin da stimulan mai saurin tasiri ke yi wa jikin wanda yake sake shan abu duk minti biyu. Ba alama ba ne cewa wannan bai yi aiki ba. Karfin da aka samu shi ne sakamakon abin da tsarin da ke cikin Sashe na 1 ya bayyana.

Sashe na 4 - Abin da Zaka Fasa Cikin Yakin.

- Wataƙice, saurin tasowa da kuma yadda take tsagaya ba ta hanyar sauke hankali ba, amma ta hanyar wani abin mamaki. Wannan ya yi daidai da yadda 3-MMC ke nufi daga jiki.
- Wata buƙi mai tsanani da ke sake bayyana cikin sa'o'in farko bayan an daina amfani da abu, wanda yake da ƙarfi fiye da yawan buƙatar da ta kasance a tsawon lokaci kuma mara ƙarfi, wacce ake samu a yayin amfani da wasu abubuwa.
- Matsalolin da suka shafi zuciya bayan amfani da kwayoyi masu yawan adadin (ƙyauwar zuciya, tsalle-tsalle) waɗanda za su iya ci gaba fiye da lokacin ƙwayoyin, har zuwa ɗin ko fiye — duba wannan, maimakon kawai ɗaukar cewa zata wuce.
- Idan amfani da maganin kashewa ko sauran magunguna ya zama wani sashi na al'ada, yanke tsarin rabuwar 3-MMC na iya zama abu mai wahala, kuma za su iya bayyana ne kamar abin da ke faruwa a lokacin rabuwar wasu magunguna da ake amfani da su a cikin irin wannan yanayi.

Sashe na 5 - Magance Genetik.

Jini / Kirƙira	Ba daidai ba ne.
DRD2 (Taq1A)	Masu cinyewa na allele A1 na iya jin mummunan sakamakon sake amfani da kwayar cuta, saboda ƙaramin adadin masu karɓuwa a jiki wanda ke shiga cikin tsawon lokacin 3-MMC.
COMT (Val158Met)	Yana da alaka da yadda jinin dopamine ke ragu a lokacin damuwa, kuma yana taimakawa wajen samar da abubuwa da za su maye gurbin jin dadin da ake samu kafin farfadowa — duba jagorar farfadowa, sashin 6.
MAOA (uVNTR)	Sakin monoamines na iya shafar yadda mummunan sakamako ke faruwa bayan wani lokaci da aka ci abinci sosai.

Sashe na 6 - Amfani da Kashi-kashi na Magunguna da Yanayin 'Yan Adam.

Amfani da 3-MMC sau da yawa baya faruwa ne kawai. Fahimtar abin da sauran abubuwa ke cikin wannan yanayin na iya canzawa game da abin da ake buƙata don dakatar da amfaninsa cikin tsaro.

6.1 — Kwayoyi (ƙara opioid da stimulant)

GURAN SOSAI.

Mota mafi yawan mutuwar da aka samu dangana da 3-MMC ta hada da sauran abubuwa — galibi opioids da ake amfani dasu tare da stimulants. Amfani da stimulant ɗaya tare da opioid yana ɓata alamun da kowane abu ke nuna — tasirin stimulant na iya ɓayya rashin ƙarfi (sedation) wanda opioid overdose ke haifarwa har sai mutuwar ta kai mataki mai tsanani. Idan wannan ya shafi yadda kake amfani da abubuwa, ka sami Naloxone, kada ka yi amfani da shi kaɗai, kuma duba wannan a matsayin babban barazana a cikin wannan jagorar.

6.2 — GHB da Methamphetamine (Adalci da narkokarin kashewa)

3-MMC sau da yawa ana amfani dashi tare da GHB da/ko methamphetamine a wuraren "chemsex". Kowane abu na ƙari yana da nauyin sakamakon rabuwa da tsaro ne, kuma wannan jagorar ba ta ruɗe su. Idan wannan ya yi daidai da yanayin ka, karanta jagororin "Discontinuance" na Methamphetamine da GHB na "Recovery Kernel" a cikin wannan jerin, tare da wannan. Musamman, GHB yana da haɗarin rabuwa (ƙwayoyin) wanda ake buƙatar karanta shi ne ta musamman don tsaron likita, wanda ke cikin Sashe 0 na jagorar.

6.3 - Amfani da Injeksiyon (ƙara maganin jikin)

Idan an yi amfani da 3-MMC ta hanyar allurar, dakatarwa ya kamata ta haɗa da shirin gwajin cututtukan da ke yaduwa ta jini (HIV, hepatitis C) da kuma binciken wuraren allura, ba tare la'akari da yadda ake magance amfani da narkofi ɗaya ba. Ayukansu na kiwon lafiya na musamman ga masu amfani da narkofi a lokacin jima'i da kuma wuraren sauyawa allura a manyan biranen yawanci suna samar da wannan a cikin sirri, kuma su ne wata hanya mai kyau don shiga, ko da kafin magance yadda ake amfani da narkofi ɗaya.

6.4 — Matsalolin zuciya ko wahala ta tunani da suka riga suke nan.

⚠ **Karya.**

Wannan tarihi na cututtuka da suka shafi zuciya, ciwon numfashi, psychosis, ko bipolar disorder yana canjawa yadda ake ƙidaya haɗarin kamuwa da 3-MMC, musamman saboda tasirin sa ga zuciya da lafiya. Idan wannan ya shafi ku, tabbatar ku sanar da likitan da ke kula da ku — wannan ya shafar gaggiyar dakatar da amfani da shi, kuma yadda ake saka ido akan lafiyarku a lokacin.

Sashe na 7 - Yi amfani da rarraba iri-iri.

Mataki.	Tsari.	Abin da wannan jagorar ta bada shawara.
1 — Kwarin.	Ana amfani da shi sau ɗaya ko sau biyu, ana ba da adadin daya, kuma ba tare da amfani cikin yawan gaske ba.	Sashi na bioloji da sake gina da ake samu a cikin Jagorar Rayuwa mai Lafiya, yawanci ya isa; tuntuwa da likita idan wata matsala ta zuciya ta faru.
2 — Amfani da shi wajen bukukuwa da wasanni.	Amfani da sauƙi-sauƙi, galibi ana iyakance sake amfani.	Same as above, with attention to Section 6 if any co-used substances are part of the pattern
3 — Ka'ida ta yawan cin abinci wanda yake da sauƙi.	Majalisa da ke taɓa amfani da adadin kwayoyi akai-akai cikin sa'o'i masu yawa, kuma hakan na sake faruwa.	Ana bada shawara ga likitoci su shiga cikin wannan, musamman binciken lafiyar zuciya saboda yuwuwar damuwa da ke tasowa sakamakon amfani da kwayoyi.
4 — Yawan amfani da kwayoyi / amfani da kwayoyin narkewar jini / amfani da wasu nau'in kwayoyi.	Ƙara cin abinci cikin sauri, wanda sau da yawa yake da allura kamar GHB, methamphetamine, opioids, ko amfani da allurar.	Ana bada shawara sosai da yin kula ne na likita; duba matsalar narkewar kwayoyi gaba daya, ba kawai 3-MMC kadai — ga Sashe na 6.

Sashe na 8 - Tsarin Tsafta da Magani.

Babu magani da aka ba da izinin FDA don janyewa daga 3-MMC ko synthetic cathinone, kuma babu tsarin gyara mai ma'auni wanda ya riga ya ƙidaya zuwa wannan abu. Amma, saboda yadda amfani da wannan abun zai iya damƙar hantsi, binciken lafiyar hantsi yana da kyau a yi shi ne, ko da kafin a fara magance yawan amfanin abun. Wannan ya fi kyau idan mutum yana fama da tsalle-tsalle a cikin zuciya, ciwon ƙirji, ko kuma saurin bugawa na zuciya.

⚠ Karya.

Wannan jagorar ba za ta bayyana adadin magunguna da ake rage shi a jere, ko tsarin rage yawan amfani da magunguna, ko kuma yadda ake amfani da su don dakatar da 3-MMC, ko kuma wataƙila wasu magunguna. Likita ne kawai, wanda ya san yadda kake amfani da abubuwa, yawan lokacin da kake amfani da su, da sauran abubuwan da kake amfani da su, zai iya ba ka wannan ilimin.

Abubuwan da za ku ɗauki zuwa wannan zama:

- Wani bayanin gaskiya game da tsawon lokacin zaɓi, yawan sake amfani da kwaya, da hanyar shigarwa.
- Wani abu da ake amfani dashi tare, musamman opioids, wasu abubuwa masu karfi, GHB, ko man shaidan.

- Ko wane alamomin cutar zuciya da aka lura yayin ko bayan cin abinci sosai, har ma da waɗanda suka warƙewa ne su kansa.
- Ko amfani da allura ya kasance wani ßangare na al'ada, don haka za a shirya gwaje-gwajen BBV.

Sashe na 9 - Tsarin Bayaƙo (Bayan Matsalolin).

Wannan sashin ya fara ne da zarar kowane batu na likita mai guba (Sashi na 0) ya warare.

Mataki na 1 - Tushen Halitta

- 5-MTHF (mai amfani da folate) - yana tallafawa samarwa mai yawa na transmitters masu dogara ne akan methylation.
- Magnesium glycinate - yana tallafawa bacci da farfadowar tsarin jini bayan damuwa wacce ta samo asali daga cin abinci sosai.
- Omega-3 (EPA/DHA) – yana taimakawa wajen rage ciwon da ke cikin kwakwalwa da kuma kula da lafiyar zuciya, kuma an tabbatar da cewa ba shi da manyan abin damuwa.
- Yana da mahimmanci a kula da yawan ruwa da gurin kansa a cikin 'yan kwanakin farko - yawancin lokacin, jujuwa yana haifar da ƙunci, wanda ke ƙara wahala da damuwa ga zuciya.

Matakin na biyu - Tallafin liki-likin.

Binciken lafiyar zuciya ya zama wajibi idan an lura da alamun rashin lafiya yayin lokacin shan miya. Yanke shawara kan magungunan don janyewa daga miya (bupropion, NAC, ko wasu abubuwa da ake amfani da su ba bisa ga doka) ya kamata a yi ne ta tattaunawa da likita, kuma za a duba yadda wannan zai taso gare ku, dangane da yanayin ku na musamman da duk wani abu da kuka sha.

Matsakaici na uku - Tsarin Nerves da Sabuntawa ta Muhalli.

- Cire ko iyakance dammar samfurin na da muhimmanci sosai a nan, saboda yadda sauƙi da samuwa ke haifar da sake amfani da kwayan da aka bayyana a Sashe na 1.
- Numfashi yau da kullum da motsa jiki na yawa—yana tallafawa farfadowar tsarin dopamine kuma yana inganta lafiyar zuciya bayan damuwa mai yawan amfani.
- Daidaitawa daidai ga wuraren da aka samu matsalar shan waya – aikace-aikacen shakatawa, wurare na musamman, abokai na musamman – tare da canje-canje masu amfani, ba kawai niyya.

Sashe na 10 - Gane da Halin Daƙi, An Sake Bayyana.

⚠ GURAN SOSAI.

TUNTUBE KA NAN DA SAURI GA: ciwon wuya, bugawa ko tsarin dumi mara daidaito, yawan zafin jiki, fasingwanci, ƙarfi mai girma ko wahala, ko rasa wahayi - yayin amfani da magunguna ko sa'o'i bayan. IDAN ANA AMFANI DA MAGUNGAI: numfashi mai tsauri ko

dakewa, launin ruwan kasa a lips ɗin ko ƙwaƙwalwar yatsai, rashin amsawa - yi amfani da Naloxone idan akwai kuma kira 112. Don wahala, gajiya, da kawar da barci ba tare da wata daga abubuwan da ke sama ba, waɗannan abu ne na yauwa bisa ga tsarin a Sashe na 2, kuma tuntuwa da likita a rana ɗaya ya dace amma wannan ba gaggawa ce ta asibiti.

Sashe na 11 - Takaitaccen Jadawalin da ke Nuna Abubuwa daban-daban.

Idan wannan ya dace maka.	Ga.
Babban maganin 3-MMC, ilimin halitta da ilimin al'adu.	Recovery Kernel — Yadda za ki samu wani abu da zai kawar da sakamakon shan 3-MMC (mai ba da shawara).
Amfani da methamphetamine tare da wasu kwayoyi.	Recovery Kernel - Ka'idar Dakatarwa: Methamphetamine
Amfanar GHB/GBL/1,4-BD tare.	Recovery Kernel - Ka'idar Dakatarwa: GHB
Yin amfani da opioids tare da wasu magunguna.	Recovery Kernel - Ka'idar Dakatarwa: Maganin opioid.
Ba za a samar da bayanin wannan kalmar ba.	Recovery Kernel — Jagorar Kayayyakin Maye Gurbin Kwayoyi.
Bikin gyara barci.	Babban Takaitacce - Tsarin 09, Fashewar Barci.
Gyara dabarun muhalli / rage damar shiga.	Babban Takaitacce - Tsarin Aikin 05

Sashe na 12 - Karshen.

Sanctuary

Abin da ya sa yanke karar barin amfani da 3-MMC ya zama abu mai wahala ba shi ne tsarin jujuwa mai tsauri, amma dalili shine kwayar cuta ta wannan magunguna tana sauƙaƙewa mutum ya ci gaba da amfaninsa, sake-sake, kuma a duk lokacin. Ganin wannan a matsayin wani ɓangare na yadda abu yake, ba matsala ce ta halaye, shi ne babban kalubale. Sannan sauran abubuwa sun kasance irin abin da sashin 6 da sashin 9 suka bayyana: samun cikakken bayanin yanayin gabaɗaya daga likita, canjawa ga abubuwan da ake iya samu, da kuma gina rayuwa mai daidaito wacce ke ba da kyawawan sakamako na gaske – abin da 3-MMC ya yi kokarin nuna.

Wannan sabis ɗaya ba shawara ce ta likita, kuma ba wata hanya ce ta maye gurbin kula da cututtuka.

Crisis Resources: 988 (Suicide & Crisis Lifeline, call or text) | Crisis Text: HOME to 741741 | SAMHSA: 1-800-662-4357